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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2006</b> (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) <b>1163-0491P</b>		
Application Number	10/773,181-Conf. #6757	Filed <b>February 9, 2004</b>		
For <b>ROUTE SEARCHING APPARATUS</b>				
Art Unit <b>3661</b>	Examiner	M. Weiskopf		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	<b>Fee</b> \$120	<b>Small Entity Fee</b> \$60	\$ <b>120.00</b>
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ _____
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ _____
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ _____
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> . I have enclosed a duplicate copy of this sheet.				
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>48,917</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____				
 Signature <u>Chad J. Billings</u> Typed or printed name		<u>May 23, 2007</u> Date (703) 205-8000 Telephone Number		
<small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small>				
<input type="checkbox"/>	Total of <u>1</u> forms are submitted.			